## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Americans for Responsible Solutions-PAC	
	C C00540443
Check if 24-hour report X 48-hour report New report Amends report filed	on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
The Campaign Group	09 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1600 Locust Street	Amount
City Code	7000.00
City State Zip Code Philadelphia PA 19103	7000.00  Transaction ID : D539357  Date of Disbursement or Obligation
Purpose of Expenditure Television advertising - Estimate  Category/ Type	09 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: X House District: 02
MARILINDA GARCIA Oppose	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought  Disbut 2014	ursement For:
Full Name of Payee The Campaign Group	Date of Public Distribution/Dissemination
	09 16 2014
Mailing Address 1600 Locust Street	Amount
City State Zip Code	500000.00
Philadelphia PA 19103	Transaction ID : D539358  Date of Disbursement or Obligation
Purpose of Expenditure Television advertising - Estimate  Category/ Type	09 / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: X House District: 02
MARILINDA GARCIA Oppose	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought  Disb 2014	ursement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	507000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	1 4 1 4 1 4 1
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
2 4.10	9 18 2014
Signature	